DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10005377-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Delivery Of Location S	ignifican	t Advertising					
the specification of w	hich is at	tached hereto unless t	he following box is ch	ecked:			
() was filed on _ Number	and v	as US Appli was amended on	cation Serial No. or PC	T International .	Application		
including the claims,	as amen n which i	riewed and understood ded by any amendme s material to patentabi Foreign Priority	nt(s) referred to above	e. l acknowled			
inventor(s) certificate listed	below and	s under Title 35, United Standard Standard Italian state of the state	any foreign application for p				
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED I	JNDER 35 U.S.C. 119		
				YES:	NO:		
				YES:	NO:		
Provisional Application I hereby claim the benefit below:	under Title	35, United States Code Se	ection 119(e) of any United	l States provisional	application(s) listed		
	AP	PLICATION SERIAL NUMBER	FILING DATE				
manner provided by the fir information as defined in T application and the national	st paragraphitle 37, Coolor PCT int	of the claims of this applic th of Title 35, United State de of Federal Regulations, S ernational filing date of this	s Code Section 112, I ack ection 1.56(a) which occur application:	nowledge the duty red between the fili	to disclose material ng date of the prior		
APPLICATION SERIAL NUI	ABER	FILING DATE	STATUS (STATUS (patented/pending/abandoned)			
		<u> </u>					
business in the Patent and		pint the following attorney(Office connected therewith:	Place Customer	ecute this application	on and transact all		
Custome	Number	022073	Number Bar Code Label here				
Send Correspondence t			Direct Telephone	Calls To:			
HEWLETT-PACKARD C		ก	Raymond A Jens	Raymond A Jenski			
P.O. Box 272400 Fort Collins, Colorado 80527-2400			(541) 715-8441	(541) 715-8441			
made on information the knowledge that v or both, under Sectio	and belie villful fals n 1001 d	ments made herein of ef are believed to be tr se statements and the of Title 18 of the Unite the application or any p	ue; and further that th like so made are puni ed States Code and th	ese statements shable by fine o	were made with or imprisonment,		
Full Name of Inventor: _Jo	seph Jac	ob	Citizenship: IN				
		t #1 San Francisco,CA	94110				
Post Office Address:	Same as Residence						
Inventor's Signature			Date				

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10005377-1

	Diane R. Hammerstad 8210 NW Wynoochee Drive Corvallis, OR 97330					
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Inventor's Signature		Date				
Full Name of # 3 joint inventor:			Citizenship:			
Residence:						
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Inventor's Signature		Date				
Full Name of # 4 joint inventor	:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				
Full Name of # 5 joint inventor	r:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				
			Citizenship:			
Full Name of # 6 joint invento	or:		Oldzensing.			
Residence:						
Post Office Address:						
Inventor's Signature		Date				
Full Name of # 7 joint invento	or:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				
Full Name of # 8 joint invent	or:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				